



Student Complaint Form

International Centre for English Academic Preparation (ICEAP)

Student Information

Full Name: _____

Student ID Number (if applicable): _____

Program / Level: _____

Date of Complaint: _____

Phone Number: _____

Email Address: _____

Complaint Details

1. Type of Complaint (Please check all that apply)

- Academic Concern
- Teacher / Staff Conduct
- Attendance or Scheduling
- Student Behavior / Bullying
- Discrimination or Harassment
- Facilities / Safety
- Refund / Financial Concern
- Homestay Concern
- Other: _____



2. Description of the Complaint

Please explain your concern clearly, including important dates, names, and details.

3. Date(s) and Location(s) of Incident

Date(s): _____

Location(s): _____

4. People Involved

Please list the names of any people involved or witnesses.

5. Steps Already Taken

Have you already discussed this issue with a teacher, staff member, or administrator?

Yes

No

If yes, please explain:



6. Requested Resolution

What would you like ICEAP to do to help resolve this matter?

Supporting Documents

Please attach any supporting documents, screenshots, emails, or evidence if available.

- Attached
- Not Attached

Student Declaration

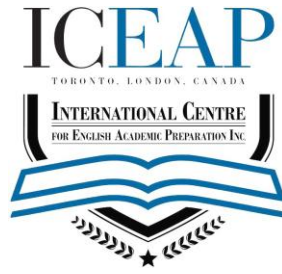
I confirm that the information provided in this complaint form is accurate and truthful to the best of my knowledge.

Student Signature: _____

Date: _____

Office Use Only

Received By: _____



Date Received: _____

Action Taken / Notes:

Outcome: _____

Resolved Date: _____

Students will not be penalized for submitting complaints in good faith.

